

Village boy moves to London

REFLECTIONS

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Conflicts of interest:

I have a paid role to be the undergraduate lead and Honorary Clinical Lecturer for UCL medical school and a Senior Clinical Tutor for the medical school of the University of Cambridge.

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In the Freshers' week magazine handed out in 1994 at a large London medical school (you can Google me to find out which one), all the clubs and societies on offer were listed in alphabetical order.

Under G it said: "Gay and Lesbian: Put on your tightest white T-shirt, darkest blue jeans, head to Soho – You'll know what to do". Well, as an 18-year-old from a tiny hamlet in rural Lancashire, I had absolutely no idea what 'to do' was or what that meant. Subconsciously, they made an implicit statement to any LGBT+ student saying – 'whatever you want – you won't find it here.' The support provided for young LGBT+ students in the mid 90s was scarce at best and non-existent at worst; tangible in the fact that the "B, T and +" elements of the LGBT+ community had not been recognised by the editors of the Freshers' booklet; made invisible, side-lined, without even acknowledging their existence. Day one, week one. How would you feel?

Less than 25 years ago things were very different. London as an 18-year-old man, mildly confused as to where his sexuality quite sat, was a daunting and foreboding place in trying to discover who you were. I knew of one out gay man, in a medical school of 1500 students. Fear of discrimination was everywhere. Would you be 'outed' against your will, marginalised, ostracised, actively not given opportunity? Section 28 of the Local Government Act 1988 was in force throughout my school years. It had been enacted when I was 12 and finally made redundant three weeks before my graduation in 2000 (superseded by the Learning and Skills act). These 210 words supressed conversation about being gay, not just about gay sex, because teachers were so afraid of discussing homosexuality for fear of punishment by law. This situation impacted the entirety of my senior school and college years.

I was not the only one affected by this law – all of my friends, gay or straight, were impacted too. My straight friends were prevented from

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learning about different relationships by the government, prohibited from learning about others who might be different to them. LGBT+ students were unable to raise their thoughts or feelings to teachers. Teachers were even fearful of discussing 'gay bullying' for falling foul of the regulations. Its damning phrases stated that schools "shall not intentionally promote homosexuality or publish material with the intention of promoting homosexuality" or "promote the teaching in any maintained school of the acceptability of homosexuality as a pretended family relationship". (1) This was a deliberate drive by the state to alienate and force invisibility upon LGBT+ students. How many LGBT+ children and young adults were drove into silence? How many children suffered mental health issues, eating disorders, depression, and all the other effects of discrimination that exist? No one will know. Section 28 constituted a malignant and pernicious intervention by the state and society to mis-educate its young in diversity and inclusion.

Section 28 wasn't formally taken off the statue books for another three years, a redundant clause in a forgotten act. Yet, when it went, quite literally struck off, I felt an overwhelming sense of joy. It was single the most devastating act of Parliament on my life and almost certainly a contributing factor to me coming out at 23. Further legislation on any sort of discriminatory issue has to, must, be squashed at its very inception. No community, sexuality, race, gender or creed must ever suffer the same treatment. Its supporters claimed Section 28 would 'protect' children – what it did was rob me of my early adulthood.

I met my boyfriend, now partner of over 20 years, in the fourth year of medical school introduced by mutual friend. My flatmates knew about my sexuality, eventually, by the virtue that we all lived together rather than by active choice. Yet it wasn't until results day in June 2000, at the college bar, after pretty much six solid hours spent consuming cheap lager interspersed with champagne, that we kissed in public for the first time outside of a gay bar. In the middle of the dance floor. And apparently, according to close and valued friends, for longer than was strictly necessary to show our feelings for each other!

Since that day I have made an active choice - not to be silenced anymore. Not by outright activism but by quietly plodding on with my day. Talking about my husband and family openly as the totally normal thing that it is. Discussing our two children's love and affection for us, as well as the occasional temper tantrum! Having a picture of the four of us proudly displayed in my office for all visitors to see. Not the "pretended family relationship" feared by the proponents of Section 28; the actual family relationship and reality of our life, with all its frank normalness: School runs, dog walks, play dates, and birthday parties.

One recent visitor to my office caused me to reflect on my own prejudices, however. A young female doctor wanted to discuss a scan request and after a few minutes, on the conclusion of our conversation, her comment "I love that picture of your family, Dr Topping" took me by some surprise. On reflection later, was I surprised because the young doctor wore a hijab (my own prejudice laid bare) or was it that she was comfortable talking about a different family relationship, perhaps because she herself had been taught about different families at school? Was it that she was brought up understanding acceptance and tolerance of different family groups? The most junior doctors today, and readers of this journal, being of school age post-abolishment of Section 28 is surely partially responsible.

As a lead for a medical school at my hospital site I feel privileged to be able to support LGBT+ students who study with us. I hope that I am the role model to them that I never had. I am proud to be able to give reassurances that there are those who are just like them. That we have good consultant jobs, are in positions of leadership and student welfare, have families, are open about who we are and share our lives without the fear of discrimination. Times have changed, thank goodness, and I am proud to be an inspiration to my LGBT+ and straight students alike.

Finally, I would ask you to put yourself into that 18-year-old boys' shoes. Day one, week one. How would you have felt? What advice could you give to a colleague in a similar situation? How could you support that friend? Our duty as a doctor is to "Never discriminate unfairly against patients or colleagues." (2) I reflect that today, as I look at a list of names of the chest X-rays waiting to be reported, they all have different diagnoses, pneumonia, heart failure, cancer etc. But each one does not say LGBT+ or straight; it says human, and, believe me, we all look the same.

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